

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	DR	32	10/17
FORMALITY REVIEW	TL	1141	11/15
RESPONSE FORMALITY REVIEW	TQ	1113	11-28-01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
1	10/13/01
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If more than 150 claims or 10 actions  
staple additional sheet here

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953  
11-05-01  
035  
11/28/01

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